
State: Arkansas **Filing Company:** QCA Health Plan, Inc.
TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)
Product Name: IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)
Project Name/Number: /

Filing at a Glance

Company: QCA Health Plan, Inc.
Product Name: IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)
State: Arkansas
TOI: H16I Individual Health - Major Medical
Sub-TOI: H16I.005B Individual - Point-of-Service (POS)
Filing Type: Rate
Date Submitted: 10/26/2012
SERFF Tr Num: QUAC-128726888
SERFF Status: Closed-Approved-Closed
State Tr Num:
State Status: Approved-Closed
Co Tr Num:

Implementation: 01/01/2013
Date Requested:
Author(s): Jim Couch, Liz Hubbard
Reviewer(s): Rosalind Minor (primary), Donna Lambert, Bob Alexander
Disposition Date: 12/06/2012
Disposition Status: Approved-Closed
Implementation Date: 02/06/2013

State Filing Description:

State: Arkansas **Filing Company:** QCA Health Plan, Inc.
TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)
Product Name: IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)
Project Name/Number: /

General Information

Project Name: Status of Filing in Domicile:
Project Number: Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:
Explanation for Combination/Other: Market Type: Individual
Submission Type: New Submission Individual Market Type: Individual
Overall Rate Impact: 9.9% Filing Status Changed: 12/06/2012
State Status Changed: 12/06/2012
Deemer Date: Created By: Jim Couch
Submitted By: Jim Couch Corresponding Filing Tracking Number:
PPACA: Not PPACA-Related

PPACA Notes: null

Include Exchange Intentions: No

Filing Description:

Rate increase for QCA Health Plan, Inc. individual products, specifically, IQChoice (original product), IQChoice Select, and IQChoice Select for Child Only.

Company and Contact

Filing Contact Information

Jim Couch, VP of Compliance jim.couch@qualchoice.com
12615 Chenal Parkway, Suite 300 501-228-7111 [Phone] 5118 [Ext]
Little Rock, AR 72211 501-707-6729 [FAX]

Filing Company Information

QCA Health Plan, Inc. CoCode: 95448 State of Domicile: Arkansas
12615 Chenal Parkway, Suite 300 Group Code: Company Type: Health
Little Rock, AR 72211 Group Name: Maintenance Organization
(501) 228-7111 ext. [Phone] FEIN Number: 71-0794605 State ID Number:

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation:
Per Company: No

Company	Amount	Date Processed	Transaction #
QCA Health Plan, Inc.	\$50.00	10/26/2012	64326989

State:	Arkansas	Filing Company:	QCA Health Plan, Inc.
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)		
Product Name:	IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)		
Project Name/Number:	/		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	12/06/2012	12/06/2012

Objection Letters and Response Letters

Objection Letters

Status	Created By	Created On	Date Submitted
Pending Industry Response	Rosalind Minor	10/31/2012	10/31/2012
Pending Industry Response	Rosalind Minor	10/31/2012	10/31/2012

Response Letters

Responded By	Created On	Date Submitted
Jim Couch	11/06/2012	11/15/2012
Jim Couch	11/29/2012	11/29/2012

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Objection letter of 10/31/12	Note To Filer	Rosalind Minor	11/21/2012	11/21/2012
Objection letter of 10/31/12 at 12:25 PM	Note To Filer	Rosalind Minor	11/01/2012	11/01/2012
IQChoice Rate Increase Request	Note To Reviewer	Jim Couch	10/13/2012	10/26/2012

SERFF Tracking #:	QUAC-128726888	State Tracking #:	Company Tracking #:
State:	Arkansas	Filing Company:	QCA Health Plan, Inc.
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)		
Product Name:	IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)		
Project Name/Number:	/		

Disposition

Disposition Date: 12/06/2012

Implementation Date: 02/06/2013

Status: Approved-Closed

HHS Status: HHS Approved

State Review: Reviewed by Actuary

Comment:

We have approved a 9.900% level rate increase on your submission. Your submission outlined an effective date of February 1, 2013, or 60 days after approval, whichever is later. Since the 60 days is later, we put the implementation date at 2/6/2013. The approval is subject to the following conditions:

1. Rate increase will not be given prior to the first annual anniversary date of any policy.
2. After the first annual anniversary date of any policy, increases will not be given more frequently than one in a twelve (12) month period.
3. All increases in rates, other than a change in age or an individual moving to another geographical areas, must be submitted to our Department for approval.

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
QCA Health Plan, Inc.	Increase	9.900%	9.900%	\$1,102,000	3,553	\$11,130,000	9.900%	9.900%

Percent Change Approved:

Minimum: 9.900%

Maximum: 9.900%

Weighted Average: 9.900%

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved-Closed	No
Supporting Document (revised)	Rate Summary Worksheet	Approved-Closed	No
Supporting Document	Rate Summary Worksheet	Replaced	No
Supporting Document (revised)	Consumer Disclosure Form	Approved-Closed	No

State:	Arkansas	Filing Company:	QCA Health Plan, Inc.
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)		
Product Name:	IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)		
Project Name/Number:	/		

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Consumer Disclosure Form	Replaced	No
Supporting Document	Exhibit 3 to Bulletin 6A-2011	Approved-Closed	No
Rate	Actuarial Memo Supporting Rate Increase	Approved-Closed	No
Rate	Rates	Approved-Closed	No

State: Arkansas **Filing Company:** QCA Health Plan, Inc.
TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)
Product Name: IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)
Project Name/Number: /

Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	10/31/2012
Submitted Date	10/31/2012
Respond By Date	

Dear Jim Couch,

Introduction:

This will acknowledge receipt of the captioned filing.

Objection 1

- Consumer Disclosure Form (Supporting Document)

Comments:

I also need a Consumer Disclosure Form. This request is done at the Commissioner's discretion. Refer to Bulletin 6A-2011.

Conclusion:

A.C.A. 23-79-109(1)-(5) sets forth the procedure by which filings may be deemed approved upon the expiration of certain time periods with no affirmative action by the commissioner. If the commissioner determines that additional information is needed to make a decision regarding approval, such request for information will be made to the company. The filing will not be considered complete until said additional information is received. The time periods set forth in this statute will not begin to run until the filing is complete.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

State: Arkansas **Filing Company:** QCA Health Plan, Inc.
TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)
Product Name: IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)
Project Name/Number: /

Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	10/31/2012
Submitted Date	10/31/2012
Respond By Date	11/30/2012

Dear Jim Couch,

Introduction:

This will acknowledge receipt of the captioned filing.

Objection 1

- Rate Summary Worksheet (Supporting Document)

Comments:

Under the Company Rate Information of the Rate/Rule tab, you report a Minimum, Maximum and Overall Increase of 9.900%. On the Rate Summary Worksheet the reported minimum reported is -4.6000% and the maximum reported is 24.9000%. Any changes made to the company rate information must be done by sending a post submission update. If the Rate summary Worksheet needs to be updated, please do so and replace the existing worksheet.

Under the Rate/rule Tab, you attached the actuarial memorandum. The rates should have been attached under the Rate/Rule Tab. You also attached the actuarial memorandum under the supporting documentation tab which is correct. The attached rates were attached under the supporting documentation tab with the Rate Summary Worksheet.

As outlined under our Bulletin 6A-2011, at the Commissioner's discretion, carriers may be required to submit part or all of the data included in Exhibit 3. It is requested that you provide our Department with all of the data in Exhibit 3.

Please refer to the Rate Review Detail under the Rate/Rule tab. The figures reported under the requested rate for Annual PMPM must be reported on PMPM basis.

Thank you for your cooperation.

Conclusion:

A.C.A. 23-79-109(1)-(5) sets forth the procedure by which filings may be deemed approved upon the expiration of certain time periods with no affirmative action by the commissioner. If the commissioner determines that additional information is needed to make a decision regarding approval, such request for information will be made to the company. The filing will not be considered complete until said additional information is received. The time periods set forth in this statute will not begin to run until the filing is complete.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

SERFF Tracking #:	QUAC-128726888	State Tracking #:	Company Tracking #:
State:	Arkansas	Filing Company:	QCA Health Plan, Inc.
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)		
Product Name:	IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)		
Project Name/Number:	/		

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	11/06/2012
Submitted Date	11/15/2012

Dear Rosalind Minor,

Introduction:

Response 1

Comments:

Attached.

Related Objection 1

Applies To:

- Consumer Disclosure Form (Supporting Document)

Comments:

I also need a Consumer Disclosure Form. This request is done at the Commissioner's discretion. Refer to Bulletin 6A-2011.

Changed Items:

Supporting Document Schedule Item Changes	
Satisfied - Item:	Consumer Disclosure Form
Comments:	
Attachment(s):	
Exh2L20121112Ind.pdf	
<i>Previous Version</i>	
Bypassed - Item:	Consumer Disclosure Form
Bypass Reason:	Instructions direct us to bypass at initial submission since the required documentation is not yet available.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Sincerely,

SERFF Tracking #:	QUAC-128726888	State Tracking #:	Company Tracking #:
State:	Arkansas	Filing Company:	QCA Health Plan, Inc.
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)		
Product Name:	IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)		
Project Name/Number:	/		

Jim Couch

SERFF Tracking #:	QUAC-128726888	State Tracking #:	Company Tracking #:
State:	Arkansas	Filing Company:	QCA Health Plan, Inc.
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)		
Product Name:	IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)		
Project Name/Number:	/		

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	11/29/2012
Submitted Date	11/29/2012

Dear Rosalind Minor,

Introduction:

Response 1

Comments:

Please see attached.

Related Objection 1

Applies To:

- Rate Summary Worksheet (Supporting Document)

Comments:

Under the Company Rate Information of the Rate/Rule tab, you report a Minimum, Maximum and Overall Increase of 9.900%. On the Rate Summary Worksheet the reported minimum reported is -4.6000% and the maximum reported is 24.9000%. Any changes made to the company rate information must be done by sending a post submission update. If the Rate summary Worksheet needs to be updated, please do so and replace the existing worksheet.

Under the Rate/rule Tab, you attached the actuarial memorandum. The rates should have been attached under the Rate/Rule Tab. You also attached the actuarial memorandum under the supporting documentation tab which is correct. The attached rates were attached under the supporting documentation tab with the Rate Summary Worksheet.

As outlined under our Bulletin 6A-2011, at the Commissioner's discretion, carriers may be required to submit part or all of the data included in Exhibit 3. It is requested that you provide our Department with all of the data in Exhibit 3.

Please refer to the Rate Review Detail under the Rate/Rule tab. The figures reported under the requested rate for Annual PMPM must be reported on PMPM basis.

Thank you for your cooperation.

Changed Items:

SERFF Tracking #:	QUAC-128726888	State Tracking #:	Company Tracking #:
State:	Arkansas	Filing Company:	QCA Health Plan, Inc.
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)		
Product Name:	IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)		
Project Name/Number:	/		

Supporting Document Schedule Item Changes	
Satisfied - Item:	Rate Summary Worksheet
Comments:	
Attachment(s):	
RateSummaryTemplate.xls	
<i>Previous Version</i>	
<i>Satisfied - Item:</i>	<i>Rate Summary Worksheet</i>
<i>Comments:</i>	
<i>Attachment(s):</i>	
<i>Rate Exhibits.pdf</i> <i>RateSummaryTemplate.xls</i>	
Satisfied - Item:	Exhibit 3 to Bulletin 6A-2011
Comments:	
Attachment(s):	
Exh3L20121101Ind.pdf	

State:	Arkansas	Filing Company:	QCA Health Plan, Inc.
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)		
Product Name:	IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)		
Project Name/Number:	/		

Supporting Document Schedule Item Changes	
Satisfied - Item:	Rate Summary Worksheet
Comments:	
Attachment(s):	
RateSummaryTemplate.xls	
<i>Previous Version</i>	
<i>Satisfied - Item:</i>	<i>Rate Summary Worksheet</i>
<i>Comments:</i>	
<i>Attachment(s):</i>	
<i>Rate Exhibits.pdf</i> <i>RateSummaryTemplate.xls</i>	
Satisfied - Item:	Exhibit 3 to Bulletin 6A-2011
Comments:	
Attachment(s):	
Exh3L20121101Ind.pdf	

No Form Schedule items changed.

Rate/Rule Schedule Item Changes						
Item No.	Document Name	Affected Form Numbers	Rate Action	Rate Action Information	Attachments	Date Submitted
1	Rates		New		Rate Exhibits.pdf,	11/29/2012 By: Jim Couch

Conclusion:

Sincerely,
Jim Couch

State: Arkansas **Filing Company:** QCA Health Plan, Inc.
TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)
Product Name: IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)
Project Name/Number: /

Note To Filer

Created By:

Rosalind Minor on 11/21/2012 09:28 AM

Last Edited By:

Rosalind Minor

Submitted On:

12/06/2012 12:06 PM

Subject:

Objection letter of 10/31/12

Comments:

Just a reminder that we have an objection letter pending.

Have a Very Blessed Thanksgiving.

State: Arkansas **Filing Company:** QCA Health Plan, Inc.
TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)
Product Name: IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)
Project Name/Number: /

Note To Filer

Created By:

Rosalind Minor on 11/01/2012 08:54 AM

Last Edited By:

Rosalind Minor

Submitted On:

12/06/2012 12:06 PM

Subject:

Objection letter of 10/31/12 at 12:25 PM

Comments:

The second to last paragraph on my objection letter should read: Please refer to the Rate Review Detail under the Rate/Rule tab. The figures reported under the Requested Rate and Prior Rate for Annual PMPM must be reported on a PMPM basis.

State:	Arkansas	Filing Company:	QCA Health Plan, Inc.
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)		
Product Name:	IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)		
Project Name/Number:	/		

Note To Reviewer

Created By:

Jim Couch on 10/13/2012 09:42 AM

Last Edited By:

Rosalind Minor

Submitted On:

12/06/2012 12:06 PM

Subject:

IQChoice Rate Increase Request

Comments:

Just a reminder that QCA requested to close its original IQChoice product and to begin offering only its new IQChoice Select product. Through discussions with the Department, it was decided to not close the original IQChoice product, but a 35% rate increase was allowed. This filing is, therefore, the 2nd request for an increase for the original IQChoice product and the 1st request for an increase in the new IQChoice Select product.

Also, please see attached cover letter from Ed Goral, our in-house actuary who prepared these documents.

September 26, 2012

Ms. Rosalind Minor
Senior Certified Rate and Form Analyst
Life and Health Division
Arkansas Department of Insurance
1200 West Third Street
Little Rock, AR 72201-1904

Subject: QCA Health Plan, Inc. Individual Product Rate Filing – Forms IQC (10-10),
IQCSelect (2011), Child Only (2011)

Dear Ms. Minor:

Enclosed please find Rate Pages (Exhibit A, Exhibit B, Exhibit C, Exhibit D, and Exhibit E),
and an Actuarial Memorandum in connection with filing of a rate increase for QualChoice's
individual health product.

The new rates will be effective 2/1/2013, and will be implemented according to each
certificate's issue date and date of prior rate increase.

If you have any questions, please feel free to contact me.

Sincerely,

Edgar J. Goral
Director of Actuarial Services
(501) 219-5149

Enclosures

State: Arkansas **Filing Company:** QCA Health Plan, Inc.
TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)
Product Name: IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)
Project Name/Number: /

Post Submission Update Request Processed On 11/14/2012

Status: Allowed
Created By: Jim Couch
Processed By: Rosalind Minor
Comments:

Company Rate Information:

Company Name:QCA Health Plan, Inc.

Field Name	Requested Change	Prior Value
PRIOR RATE:		
Min:	63.000	754.000
Max:	462.000	5,547.000
Wighted Avg.:	150.000	1,801.000
REQUESTED RATE:		
Min:	69.000	829.000
Max:	508.000	6,096.000
Weighted Avg.:	165.000	1,979.000

SERFF Tracking #:	QUAC-128726888	State Tracking #:		Company Tracking #:	
State:	Arkansas	Filing Company:	QCA Health Plan, Inc.		
TOI/Sub-TOI:	H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)				
Product Name:	IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)				
Project Name/Number:	/				

Rate Information

Rate data applies to filing.

Filing Method:

Rate Change Type: Increase

Overall Percentage of Last Rate Revision: 35.000%

Effective Date of Last Rate Revision: 10/01/2011

Filing Method of Last Filing:

Company Rate Information

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):	
QCA Health Plan, Inc.	Increase	9.900%	9.900%	\$1,102,000	3,553	\$11,130,000	9.900%	9.900%	
Product Type:		HMO	PPO	EPO	POS	HSA	HDHP	FFS	Other
Covered Lives:					6,180				
Policy Holders:					3,553				

State: Arkansas **Filing Company:** QCA Health Plan, Inc.
TOI/Sub-TOI: H16I Individual Health - Major Medical/H16I.005B Individual - Point-of-Service (POS)
Product Name: IQChoice (including original product, IQChoice Select, and IQChoice Select for Child Only)
Project Name/Number: /

Rate Review Detail

COMPANY:

Company Name: QCA Health Plan, Inc.
HHS Issuer Id: 70525
Product Names: QCA Health Plan, Inc.'s individual products, specifically, IQChoice (original product), IQChoice Select, and IQChoice Select Child Only
Trend Factors:

FORMS:

New Policy Forms: IQC (1-13) (for IQChoice (original product), IQCSelect (2013), and IQChoice Select Child Only (2013)
Affected Forms: None
Other Affected Forms: IQC (10-10) (original product), IQCSelect (2011), and Child Only (2011) (including amendments thereto)

REQUESTED RATE CHANGE INFORMATION:

Change Period: Annual
Member Months: 74,160
Benefit Change: None
Percent Change Requested: Min: 9.9 Max: 9.9 Avg: 9.9

PRIOR RATE:

Total Earned Premium: 11,130,000.00
Total Incurred Claims: 8,905,000.00
Annual \$: Min: 63.00 Max: 462.00 Avg: 150.00

REQUESTED RATE:

Projected Earned Premium: 12,948,000.00
Projected Incurred Claims: 10,902,000.00
Annual \$: Min: 69.00 Max: 508.00 Avg: 165.00